

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/						51	
2		/	/				52	
3		/	/				53	
4		/	/				54	
5		/	/				55	
6		/	/				56	
7		/	/				57	
8	/						58	
9	/	/	/				59	
10	/	/	/				60	
11		/	/				61	
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45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	3	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	8	↓		↓		↓	TOTAL DEP.	↓
TOTAL CLAIMS	11						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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